

REPORT TO CITY CLERK
SPECIAL DESIGNATED LICENSE APPLICATION

#506

- Police
- City Attorney
- Bureau of Fire Prevention
- Health Department

DATE: 6/23/05
Return by: 7/14/05

CATERER: X

NON-CATERER:

APPLICANT: GEEMAX INC. DBA THE ~~A~~ZONE, 728 1/2 Q STREET

ADDRESS OR LOCATION OF PREMISES TO BE COVERED BY LICENSE: PARKING LOT
IMMEDIATELY ADJACENT TO LICENSED PREMISES.

DATE (S) & TIME(S) OF EVENT : SEPTEMBER 3, 10, 17; OCTOBER 1, 8, 29; NOVEMBER 12, 2005;
TIMES: 8AM TO 1AM EACH DATE

DETAILS ON ATTACHED APPLICATION.

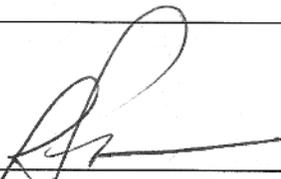
RECOMMENDATION OF APPROVAL OR DENIAL

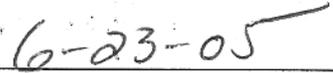
 APPROVED

CONDITIONS _____

_____ DENIED

REASON(S) FOR _____


Signature


Date

(If needed, use back for additional space)

PUBLIC HEARING BEFORE COUNCIL: 7/18/05
(SDLRPT.JER)

PLEASE TYPE OR PRINT
APPLICANT MUST COMPLETE
ALL SECTIONS OF THIS FORM

APPLICATION FOR SPECIAL DESIGNATED LICENSE
NEBRASKA LIQUOR CONTROL COMMISSION
P.O. Box 95046, Lincoln NE 68509

ALL ISSUED LICENSES ARE MAILED TO LOCAL CLERKS WHERE THE EVENT IS HELD

- All Applications must be received in the Commission Office 10 working days (excluding holidays) prior to the date of the event
- Complete and return **THE ORIGINAL WITH A DUPLICATE** to the Nebraska Liquor Control Commission
- A license fee of \$40 (payable to Nebraska Liquor Control Commission) for each day
- LOCAL APPROVAL must be included with this application
- A Signed Statement from Local Police Chief or County Sheriff (question #12)
- NON PROFIT CORPORATION MUST include a letter from the IRS declaring that the corporation is exempt from payment of federal income taxes, or a copy of the corporation's federal income tax return, as filed with the IRS, or a statement (Page 3) signed by an officer of the corporation declaring that the copy of the tax return is a true and correct copy as filed with the IRS**

1. Type of Beverage(s) to be served: Beer Wine Distilled Spirits

2. Status of the Applicant (check one) Public
 Municipal Corporation Political Corporation Fine Arts Museum Fraternal Corporation Religious Corporation Charitable Corporation Retail Licensee Service Corporation

3. Name and Address of Corporation, Organization or Licensee obtaining license. If licensee, give license number and Class (Example C/K) IK 33617
(City, State, County Number, Zip Code)

Geemax Inc.
728 1/2 Q ST LINCOLN, NE 68508

4. Address or location of premises to be covered by license. (City, County Number, Zip Code)
N-ZONE 728 1/2 Q ST LINCOLN, NE 68508

Is this PREMISE currently licensed under the Nebraska Liquor Control Act? YES NO

5. Name and Address of owner or lessee and name of principal occupant of the premises for which the license is requested.
Geemax Inc.
728 1/2 Q ST LINCOLN, NE 68508 THE N-ZONE

6. Please list the name and telephone number of the primary event supervisor, who will actually be present at the location of the event when occurs, that can be contacted by law enforcement before and during the event, and who is responsible for ensuring that any applicable laws, ordinances, rules and regulations are adhered to. Supervisor must sign on page 2.

MIKE MCCARTY (475-8683) CHERYL MCCARTY

7. DATE(S) OF EVENT (If a Sunday, attach local Sunday Sales Ordinance and hours of consumption.)
9/3/05

PLEASE INDICATE AN ALTERNATE DATE OR LOCATION IN THE EVENT OF BAD WEATHER:

Time(s) of event (example 8am to 1am, this is considered one day)

FROM: 8 AM. TO: 1 AM.

8. Describe the Type of Activity to be carried on during the time period for which the license is requested.

Outdoor Food & Beverage
Provide an estimated number of attendees at this event 150. If the number of attendees is over 250 attach a separate page indicating the steps that will be taken to prevent underage persons access to alcoholic beverages.

PLEASE ATTACH A SIGNED STATEMENT FROM YOUR LOCAL POLICE CHIEF OR COUNTY SHERIFF, WHICHEVER APPLICABLE, THAT LOCAL LAW ENFORCEMENT HAS BEEN INFORMED IN ADVANCE OF THIS EVENT, AND IF THEY ARE AWARE OF ANY REASON THE EVENT SHOULD NOT OCCUR. ON FILE

9. List the number of SDL's that you have applied for at this specific location in the last six months. 0

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P.O. Box 95046, Lincoln NE 68509

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outdoor FOOD & Beverage

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CITY CLERK'S OFFICE
CITY OF LINCOLN
NEBRASKA
2005 JUN 22 PM 2:55

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728 1/2 Q ST LINCOLN, NE 68508 THE N-ZONE

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CONTINUE ON BACK

CITY OF LINCOLN
NEBRASKA
JUN 22 PM 2:34
CITY CLERK'S OFFICE

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CITY CLERK'S OFFICE
 2005 JUN 22 PM 2:35
 CITY OF LINCOLN
 NEBRASKA

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10/29/05

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JUN 23 2005
 CITY OF LINCOLN
 NEBRASKA
 CLERK'S OFFICE
 PM 2 34

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SPECIAL DESIGNATED LICENSE APPLICATION
SUPPLEMENTAL FORM

The Special Designated License process is not intended to be used as a means to expand the existing licensed premise.

Name of Event: THE N-ZONE outdoor Food & Beverage

Applicant and Sponsoring Organization or Person (if applicable): Greemax Inc.
THE N-ZONE

Date of Event: 9/3, 9/10, 9/17, 10/1, 10/8 Time of Event: 8 A.M. - 1 A.M.
10/29, 11/12

Has the applicant applied for and received liquor liability insurance? Yes No

Number of persons expected to attend: 150 Number of persons under 21 expected: 0
Is the event open to the public? Yes No

How will you ensure that minors will not be served or consume beverages containing alcohol:
Security person at each entrance. No one under 21 permitted

Will food be served? Yes No If yes, please list food to be served:
FULL MENU. Sandwiches, Appetizers, Side items
SALADS, soups, pizza.

Will non-alcoholic beverages be served: Yes No If yes, please list non-alcoholic beverages to be served:
WATER, All Coca-Cola products,
LEMONADE

Please identify the beverages containing alcohol that will be served: Wine Beer
 Distilled Spirits

Will this be a cash or complimentary bar? Cash Complimentary

Who will serve the beverages containing alcohol? trained bartender
Have the designated servers received responsible beverage service training? Yes No

Will there be a charge for admission? Yes No

In the last 12 months, have you received notice of a liquor law violation that occurred during an event at which you were the special designated licensee? Yes No If so, explain:

PLEASE USE REVERSE TO PROVIDE A DRAWING

Neil McCarty
Applicant's Signature

9/10/05
Date

THE N-ZONE
728 Q ST
LOWER LEVEL

